PAGE 1 / 7

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

	or Other Than An Autr	ionzed Committee	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
INDEPENDENT LEAD	ERSHIP FUND		
<u> </u>			
ADDRESS (number and street)	131 MADEIRA AVE 2ND FL	OOR	
Check if different			
than previously reported. (ACC)	CORAL GABLES		FL 33134
2. FEC IDENTIFICATION NU	IMBER ▼ CIT	Y 🛦	STATE ▲ ZIP CODE ▲
C C00609933		S THIS NEW (N) OI	AMENDED (A)
4. TYPE OF REPORT (Choose One)	Report Due On:	20 (M2) May 20 (M	(Non-Election Year Only)
(a) Quarterly Reports:		20 (M3) Jun 20 (M	(Non-Election Year Only)
April 15 Quarterly Report (Q		20 (M4) Jul 20 (M7	Oct 20 (M10)
July 15	PRF-Flection	Primary (12P)	General (12G) Runoff (12R)
Quarterly Report (Q October 15	Report for the:	Convention (12C)	Special (12S)
Quarterly Report (Q January 31 Year-End Report (Y	Floation	n on	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day	General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)	Election	n on	in the State of
5. Covering Period 11	29 / 2016	through 12	M / D D / Y E Y E Y E Y E Y E Y E Y E Y E Y E Y
I certify that I have examined thi	Goode, Michael, , ,	my knowledge and belief it is	true, correct and complete.
Type or Print Name of Treasurer			
Signature of Treasurer	e, Michael, , ,	[Electronically Filed]	Date 01 / 18 / 2017
NOTE: Submission of false, errone	eous, or incomplete information	n may subject the person signing	g this Report to the penalties of 52 U.S.C. § 30109
Office Use			FEC FORM 3X Rev. 05/2016

OF FEC Form 3X (Rev. 05/2016)	SUMMARY PAGE RECEIPTS AND DISBURSEMENTS	Page 2
Write or Type Committee Name		- 3
INDEPENDENT LEADERSHIP FUN	ID	
	-	
Report Covering the Period: From:	/ 29 / 2016 To:	12 / 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
_	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2016		0.00
(b) Cash on Hand at Beginning of Reporting Period	55864.43	
(c) Total Receipts (from Line 19)	0.00	224100.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	55864.43	224100.00
7. Total Disbursements (from Line 31)	2015.63	170251.20
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	53848.80	53848.80
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
This committee has qualified as a multicand	didate committee. (see FEC FORM 1M)	
Fc	or further information contact:	
	Federal Election Commission	

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

INDEPENDENT LEADERSHIP FUND

R	eport Covering the Period: From:	29 2016 To				
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date			
11.	Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees					
	(i) Itemized (use Schedule A)	0.00	224000.00			
	(ii) Unitemized	0.00	100.00			
	(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	0.00	224100.00			
	(b) Political Party Committees	0.00	0.00			
	(c) Other Political Committees (such as PACs)	0.00	0.00			
	(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)▶	0.00	224100.00			
12.	Transfers From Affiliated/Other Party Committees	0.00	0.00			
13.	All Loans Received	0.00	0.00			
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00			
16.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00			
	to Federal Candidates and Other Political Committees	0.00	0.00			
	Other Federal Receipts (Dividends, Interest, etc.) Transfers from Non-Federal and Levin Funds	0.00	0.00			
	(a) Non-Federal Account (from Schedule H3)	0.00	0.00			
	(b) Levin Funds (from Schedule H5)	0.00	0.00			
	(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00			
19.	Total Receipts (add Lines 11(d),					
	12, 13, 14, 15, 16, 17, and 18(c))▶	0.00	224100.00			
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	0.00	224100.00			

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
Operating Expenditures: (a) Allocated Federal/Non-Federal		Calchaal Tour to Date		
Activity (from Schedule H4)	0.00			
(i) Federal Share	0.00	0.00		
(ii) Non-Federal Share	0.00	0.00		
(b) Other Federal Operating	4 4			
Expenditures	1765.63	75264.95		
(c) Total Operating Expenditures	4705.00	75264.95		
(add 21(a)(i), (a)(ii), and (b))▶ Transfers to Affiliated/Other Party	1765.63	73204.93		
Committees	0.00	0.00		
Contributions to Federal Candidates/Committees	4 4	4 4 4		
and Other Political Committees	0.00	0.00		
Independent Expenditures (use Schedule E)	0.00	94736.25		
Coordinated Party Expenditures	0.00	34730.23		
(52 U.S.C. § 30116(d)) (use Schedule F)	0.00	0.00		
	7 7 7			
Loan Repayments Made	0.00	0.00		
Loans Made	0.00	0.00		
Refunds of Contributions To: (a) Individuals/Persons Other	0.00	4 4		
Than Political Committees	250.00	250.00		
	4 4 4	4 1 4 1 4		
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees (such as PACs)	0.00	0.00		
(d) Total Contribution Refunds	0.00	0.00		
(add Lines 28(a), (b), and (c))	250.00	250.00		
	45 45 45	4 4		
Other Disbursements (Including				
Non-Federal Donations)	0.00	0.00		
Federal Election Activity (52 U.S.C. § 30101(2	20))			
(a) Allocated Federal Election Activity				
(from Schedule H6)				
(i) Federal Share	0.00	0.00		
(ii) "Levin" Share	0.00	0.00		
(b) Federal Election Activity Paid	3.00	4 4		
Entirely With Federal Funds	0.00	0.00		
(c) Total Federal Election Activity (add				
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00		
Total Disbursements (add Lines 21(c), 22,				
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	2045 62	470254-20		
,,,,,,,,,,	2015.63	170251.20		
Total Federal Disbursements				
(subtract Line 21(a)(ii) and Line 30(a)(ii)				
from Line 31)	2015.63	170251.20		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)	or dispursements	Page 5		
III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
33. Total Contributions (other than loans) (from Line 11(d), page 3)	0.00	224100.00		
34. Total Contribution Refunds (from Line 28(d))	250.00	250.00		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	-250.00	223850.00		
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	1765.63	75264.95		
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00		
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1765.63	75264.95		

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SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 6 OF				E 6 OF 7	
ITEMIZED DISBURSEMENTS		parate schedule(s) category of the	I `	eck only one) 21b 22 23 26 27			07	
		Summary Page	21b		23 28c	26 29		
Any information conicd from such Deposits and Chat								
Any information copied from such Reports and State or for commercial purposes, other than using the na								
NAME OF COMMITTEE (In Full)								
INDEPENDENT LEADERSHIP F	JND							
Full Name (Last, First, Middle Initial)								
A. Professional Data Services				M = M	Disbursen		YYY	
Mailing Address 824 S Milledge Ave Ste 101					12 01 2016			
City Athens	State GA	Zip Code 30605		FEC Idea	ntification	Number		
Purpose of Disbursement	- O/ t	30003		C				
PAC Compliance Services					ti !	D - CD04D	424.4	
Candidate Name			Category/			D : SB21B Disburseme	ent this Period	
			Type					
	ement For:						1511.44	
Senate President		Primary General Other (specify) ▼						
State: District:	Other (spe	ecity) 🔻		Mem	no Item			
Full Name (Last, First, Middle Initial)								
B. Professional Data Services				Date of Disbursement				
				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Mailing Address 824 S Milledge Ave Ste 101					12 29 2016			
City Athens	State GA	Zip Code 30605		FEC Ider	ntification	Number		
Purpose of Disbursement		001			C Transaction ID : SB21B.4316			
PAC Compliance Services								
Candidate Name		Category/ Type		Amount of Each Disbursement this Period				
Office Sought: House Disburse	mont For:			254.19				
Office Sought: House Disburse Senate	ement For:	nent For: Primary General			254.19			
President	Other (spe							
State: District:				Mem	no Item			
Full Name (Last, First, Middle Initial)								
C.					Disbursen			
Mailing Address				M = M	/ D D) / Y	YYY	
City	State	Zip Code		FFC Idea	ntification	Number		
Purpose of Disbursement				1			-	
Purpose of Disbursement					C			
Candidate Name		Category/		Amount of Each Disbursement this Period				
			Type	7	7. Zuo Z			
	ement For:	nent For:						
Senate	Primary	General						
State: District:	Uther (spe	Other (specify) ▼			Memo Item			
								
SUBTOTAL of Disbursements This Page (optional)						1 40 1	1765.63	
,					,	,	4705.00	
TOTAL This Period (last page this line number only	v)						1765.63	

S 17

Use separate schedule(s) (check only one) (check one) (check only one) (check on	SC	CHEDULE B (FEC Form 3X)		FOR LIN			NE NUMBER: PAGE 7 OF 7				
Detailed Summary Page x 28a 28b 28b 29b 30b 30b	ITE	EMIZED DISBURSEMENTS			I ` —	(check only one)					
Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of seliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In PLEADERSHIP FUND) Full Name (Last, First, Middle Initial) A. Stobs, J, Robert, , Mailing Address 580 NE 92nd St City											
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Pull) INDEPENDENT LEADERSHIP FUND Full Name (Last, Frist, Middle Initial) A Stobs, J, Robert, Mailing Address 580 NE 92nd St City Mam Shores Purpose of Disbursement Refund Candidate Name Citics Sought: Full Name (Last, Frist, Middle Initial) B. City State: Disshort: Full Name (Last, Frist, Middle Initial) B. City State: Disshort: Full Name (Last, Frist, Middle Initial) Date of Disbursement Callegory/ Type Disshort: Full Name (Last, Frist, Middle Initial) Date of Disbursement Caldate Name City State: Disshort: Full Name (Last, Frist, Middle Initial) City State: Disbursement For: State: Disshort: State: Disbursement For: Caldate Name Callagory/ Type FEC Identification Number Caldate Name	Λ	v information conicd from such Benedic and Chile	monto mari	not be sold as							
Full Name (Last, First, Middle Initial)											
Full Name (Last, First, Middle Initial) A. Stobs, J, Robert, Mailing Address 580 NE 92nd St City State Zip Code FL 33138 Purpose of Disbursement Refund Candidate Name City Senate Prisadent Disbursement For: Senate Prisadent District Full Name (Last, First, Middle Initial) Candidate Name City State Zip Code FEC Identification Number City Transaction ID : SB28A.4315 Amount of Each Disbursement this Period Memo Item Date of Disbursement City State Zip Code Prisadent District Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Prisadent Disbursement For: Senate President Disbursement For: Senate President Disbursement For: Senate Prisadent Disbursement For: Senate Prisadent Disbursement For: Category/ Type		NAME OF COMMITTEE (In Full)									
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A Stobs, J, Robert, , Mailing Address 580 NE 92nd St City	<u></u>	Full Name (Last. First. Middle Initial)									
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Candidate Name Office Sought: House President State: District: Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code President President President Candidate Name Office Sought: House President Primary General Primary General President State: District: Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement For: Senate Primary General Primary General Other (specify) Memo Item FEC Identification Number Category/ Type Memo Item Amount of Each Disbursement this Period FEC Identification Number Category/ Type Memo Item Date of Disbursement this Period Category/ Type Date of Disbursement For: General Primary General					010	010					
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